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TO EXAMINER PATRICK J. D. SANTOS**

TO: Commissioner for Patents
Attn: Examiner Patrick J. D. Santos
Group Art Unit 2161
Patent Examining Corps
Facsimile Center
Washington, D.C. 20231

FROM: Rabindranath Dutta

OUR REF: 0054.0018
TELEPHONE: 310-556-7983

Total pages, including cover letter: 4/1

PTO FAX NUMBER 1-703-872-9306

If you do NOT receive all of the pages, please telephone us at 310/556-7983, or fax us at 310/556-7984.

Description of Documents Transmitted: AMENDMENT

Applicant: J.C. DelMonaco et al.
Serial No.: 10/003,952
Filed: October 30, 2002
Group Art Unit: 2161
Docket No.: SVL920010017US1

I hereby certify that this paper is being transmitted by facsimile to the U.S. Patent and Trademark Office on
June 22, 2005

By: Rabindranath Dutta
Name: Rabindranath Dutta

FORM PTO-1083

PATENT
SVL920010017US1
0054.0018

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:
J.C. DeMonaco et al.
Serial No.: 10/003,952
Filed: October 30, 2002
For: METHOD, SYSTEM, AND PROGRAM
FOR PERFORMING AN IMPACT
ANALYSIS OF PROGRAM
STATEMENTS IN AT LEAST ONE
SOURCE CODE FILE

Examiner: Patrick J. D. Santos

Art Unit: 2161

47069
Customer Number

Sir:

Transmitted herewith in the above-identified application is an:

- ☒ Amendment 38 pages.
☐ Petition for Extension of Time.
☐ Transmittal of Formal Drawings and ___ sheets of formal drawings.
☐ No additional fee is required.

The fee has been calculated as shown below:

	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NO PREVIOUSLY PAID FOR	PRESENT EXTRA RATE	ADDIT. FEE	OR	RATE	ADDIT. FEE
TOTAL	60	MINUS	60	=	0	x	\$0
INDEP CLAIMS	9	MINUS	9	=	0	x	\$0
					+	\$	OR
___ FIRST PRESENTATION OF MULTIPLE DEP. CLAIM							x 50 \$
							x 200 \$
							+ 360 \$
							TOTAL \$-0-

- ___ Please charge Deposit Account No. 09-0460 the amount of \$ ___ to cover the extension fee and also the amount of \$ ___ to cover the claim fee. A duplicate copy of this sheet is enclosed.
 ___ A credit card authorization in the amount of \$ ___ to cover the extension fee is enclosed.
 ___ A credit card authorization in the amount of \$ ___ to cover the claim fee is enclosed.
 ___ A credit card authorization in the amount of \$ ___ to cover the petition fee is enclosed.
☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 09-0460. A duplicate of this sheet is enclosed.
☒ Any filing fees under 37 CFR 1.16 for the presentation of extra claims.
☒ Any patent application processing fees under 37 CFR 1.17.

Respectfully submitted,

Rabindranath Dutta

Rabindranath Dutta
Registration No. 51,010
KONRAD RAYNES & VICTOR, LLP
315 S. Beverly Drive, Suite 210
Beverly Hills, CA 90212
(310) 556-7983 (voice)
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Dated: June 22, 2005

CERTIFICATE UNDER 37 CFR 1.8:

I hereby certify that this correspondence is being transmitted by facsimile to Patrick J. D. Santos of the U.S. Patent and Trademark Office at 703-872-9306 on June 22, 2005.

Rabindranath Dutta
Rabindranath Dutta

6/22/05
Date

FORM PTO-1083

PATENT
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TOTAL	60	MINUS 60	=	0	x	\$0	OR x 50 \$
INDEP CLAIMS	9	MINUS 9	=	0	x	\$0	OR x 200 \$
___ FIRST PRESENTATION OF MULTIPLE DEP. CLAIM							+ 360 \$
TOTAL							\$0 OR TOTAL \$-0-

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ANALYSIS OF PROGRAM STATEMENTS IN AT LEAST ONE SOURCE
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Rabindranath DuttaAMENDMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Amendments to the Claims are reflected in the listing of claims which begins on page 2.

Remarks/Arguments begin on page 17.